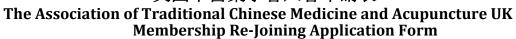
英國中醫藥學會入會申請表





♦Personal Details 个人情况			
Surname	First Name		
Name in Chinese (if applicable) 中文姓名	Sex (M/F) 性别		
	Title 称谓: Mr, Miss, Mrs, Ms, Dr, other 其他		
	Title 你问 . MI, MISS, MIS, MS, DI, Ottle I 共他		
Date of Birth 出生日期DDMMYYYY	Nationality 国籍		
Postal Address: 通信地址	Contact Telephone Number联系电话		
	E-mail 电邮地址		
Post Code 邮政编码			
♦ Details of Previous ATCM Membership ATCM前会员会	≥员资格情况		
Previous ATCM Registration Number (ATCM会员注册号):			
Trevious in the gistration manifer (Areing Areing).			
Year and Month when you joining ATCM last time (上次入会年月): Year and Month when you leave/fail to_renewal your ATCM membership (离会/未续会员资格年月): ◆ Reasons for leaving & re-joining ATCM? 离会和重新入会的原因?			
		◆ Have you ever practiced after leaving the ATCM? If so, have you involved in any professional conduct complaints or Mal-Practice incident during this period? 离会后您是否有行医? 如果是的话这期间您有涉及过任何职业操守的投诉或行医事故吗?	
Declaration 声明: I wish to apply to re-join the membership of the Association of Traditional Chinese Mowhatever inquiries it considers necessary in connection with my application. 我希望的调查。			
I hereby certify that the details on this form are true and correct to the best of my could lead to my application annulled or my membership invalidated. 我在此证实我想我的人会申请作废或会员资格的丧失。			
I will inform the ATCM Council in writing of any future changes of my personal detail occur. 一旦我的个人情况 (如通信地址, 行医 地址等)在将来有任何变更, 我将立即以			
	_		

Signature 签 名: **Date** 日 期: Please refer to the next Checklist page for required documents to support your re-joining application

请阅读下一页申请材料核查表了解需要递交的支持材料

Please return this form by email or post 请将此表及所有材料通过电子邮件或信件方式发回:

email back to: info@atcm.co.uk



ATCM Membership Re-Joining Application Checklist

- 1. Completed Membership Re-Joining Form (signed & dated), make sure you provide the details of your previous ATCM membership on the form.
- 2. A copy of your ID (passport or Driving Licence)
- 3. Copies of your relevant TCM qualification certificates
- 4. Previous ATCM Membership Certificate copy if available
- 5. £60.00 cheque made payable to **ATCM** (correct signed & dated) only if you submit your application by post.
- 6. If you submit your application by email, we will send you the application payment instruction later

Please return this form by email or post 请将此表及所有材料通过电子邮件或信件方式发回:

email back to: info@atcm.co.uk

Or post back to ATCM, Unit 15, Siddelev House, 50 Canbury Park Road, Kingston Upton Thames, KT2 6LX